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AN UNPREJUDICED INQUIRY CONCERNING THE EFFECTS OF TOBACCO ON THE HUMAN SYSTEM WHEN USED AS A LUXURY.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—Having, in Vol. XXXII. p. 509–517 of your hebdomadal, endeavored to bestow a strictly impartial consideration upon the general effects of tobacco on the human system, when used as a luxury, and having then promised a further examination of the triplicate forms in which it is consumed, I would now crave permission to do so, notwithstanding I have, since my last communication, laid down the lancet and doffed the Æsculapian robes for the purpose of soon taking up the political pen editorial. The fact of my being ranged under another standard will not so far detract my attention from medicinal matters but that, to borrow from Charles Lamb's *Farewell to Tobacco*,

"I may catch
Some collateral sweets, and snatch
Sidelong odors, that give life
Like glances from a neighbor's wife."^{*}

I cannot entirely give up my relations to Hygeia, and might justify myself in the language of the poem just quoted,

"That, as she, who once hath been
A king's consort, is a queen
Ever after, nor will bate
Any tittle of her state,
Though a widow, or divorce'd;
So I, from thy converse forc'd,
The old name and style retain,
A right Catherine of Spain."

You may expect, therefore, if you consider them worthy of helping to make up the variety expected in a weekly journal, the other historical articles and reviews which were promised some time ago, and which I shall occasionally furnish.

When employed as a masticatory, tobacco at first produces distressing nausea, vomiting, dizziness, and the other effects peculiar to the herb, and causes a biting, pungent, disagreeable sensation in the mouth and fauces, which is of considerable permanency. The glands which secrete saliva are actively stimulated, and pour out a profusion of this fluid. In a short time the continuance of the habit causes all the disagreeable im-

^{*} The Poetical Works of Charles Lamb, p. 22.

pressions to cease, and the quid gives a sensation of pleasure to the organs of taste, instead of the reverse. The increased action of the salivary glands, however, and of the mucous follicles, continues, and there is no doubt that inveterate chewers, by keeping up a constantly excessive secretion of this sort, occasion a waste of the saliva necessary for digestion, and thus produce dyspepsia and other complaints of the stomach. This is generally admitted, but Dr. Knowlton, of Ashfield, himself a chewer, denies it, and says:—"It is as common for men to have too much appetite for food, as too little; and tobacco serves most admirably to check this excess of appetite, and thus to prevent dyspepsia (which is caused by over-eating), with all its horrid train of mental and corporeal disquietudes. Tobacco consumers, and especially chewers, are very generally healthy and long-lived men. Tobacco is a most excellent depleting agent, to purge, as it were, the brain, keeping off cerebral congestions and apoplexy. Were I in the habit of admiring the arrangements of Nature, I should admire the fitness of tobacco to preserve the brain from sanguineous repletion, by keeping up a secretion of saliva, in the immediate vicinity of the brain. For every ounce of saliva which tobacco causes to be secreted, the volume of blood sent to the brain must be diminished just one ounce. This saves bleeding and a doctor's bill!"* Be this as it may, chewing tobacco is incontestably the filthiest manner in which it can be used, and I think the most deleterious, as it excites the excretories of the mouth more than smoking, and instead of being practised at times only during the day, is acting on the system without cessation, from the time the chewer rises in the morning till he retires at night, with the exception of meals, and I know some persons who go to sleep with the quid in their mouths, and thus keep themselves always under its operation. Its effects on the breath are obvious and offensive, and have afforded frequent subject of animadversion. King James I., in his Counterblast, particularly denounced them, and his denunciations have found a response in all the more modern phillippics against the plant; but Dr. Knowlton (op. cit.), even in this respect, defends his favorite weed. "We are told," he says, "that the use of tobacco is filthy. I admit this objection in all real force. But what is a little colored saliva, when weighed, as in the balance, against the immense good which I have shown to arise from the use of tobacco? No one thinks of spitting on a clean floor; and to spit upon a dirty floor serves the good purpose of hiding the grease spots—and thus protecting the woman at the expense of the man. Surely the women can't complain on this score. We are also told that chewing tobacco discolours the teeth. Well, they are easily made white again; and besides, teeth of a yellowish color don't look half so bad as rotten teeth, and great ugly spaces where teeth ought to be. We are told that tobacco renders the breath offensive to all who do not use it. Not so bad as rotten teeth: and besides, that is *their* fault; all *should* use it."

When tobacco is first smoked, it gives rise to a train of symptoms like those described as being occasioned at the commencement of chewing,

* Tobacco defended, &c., in the Boston Investigator, Vol. vii. No. 47.

but like those they are temporary, soon giving way to a persistence in the habit; if, however, the impressions are too much disregarded in the beginning, and the practice is pushed to extremes by the novice at his first attempt, in spite of them, the effects may be fatal. Dr. Marshall Hall relates a case of this kind, where a young man smoked two full pipes, although entirely unused to the custom, and so severe were the consequences that the act nearly cost him his life.* The effects of smoking on the mouth and fauces are the same as those produced by the quid. So also are the effects on the breath. Dr. Thomas Short, himself evidently a consumer of tobacco, and a great believer in the efficacy of smoking for a variety of diseases, thus describes some of the results of the habit. "Habitual smokers," he says, "have a foul, squalid tongue, their senses of taste and smell are impaired, and sometimes lost, the smell of their breath is more nauseous than that of a bog house, or of wind broken downwards after taking flour or milk of brimstone."† This method of taking tobacco is probably the least hurtful of either of the three popular modes, and requiring as it does several collateral helps for its practice, it cannot easily be pushed to such an excess as either chewing or snuffing. Carried only to a certain point it agreeably stimulates the system, but when the degree to which the constitution is accustomed is exceeded, even habitual smokers are affected like novices when they commence. Dr. Hellvvigius, a Dutch physician, relates the case of two brothers who strove which should exceed the other in smoking tobacco. One of them smoked seventeen and the other eighteen pipes. One died immediately, or, to use the words of the original, "*eo momento demortuus*," while the other lived only two or three hours.‡ The number of pipes here mentioned has not unfrequently been smoked with impunity, and the youths of whom Dr. Hellvvigius speaks must have been young smokers, or were endowed with uncommonly susceptible organizations. To some habits the custom of smoking is undoubtedly injurious, and many writers and physicians are firmly convinced that it is in every case injurious, while others go to an equally untenable extreme, and are ready to deny that it is ever so. I have no doubt that its evils have been exaggerated. Dr. Prout says, this habit "disorders the assimilating functions in general, but particularly, as I believe, the assimilation of the saccharine principle. I have never, indeed, been able to trace the development of oxalic acid to the use of tobacco; but that some analogous and equally poisonous principle (probably of an acid nature) is generated in certain individuals by its abuse, is evident from their cachectic looks; and from the dark and often greenish-yellow tint of their blood."§ On the other hand, Dr. Pereira says, "I am not acquainted with any well-ascertained ill effects resulting from the habitual practice of smoking."|| Dr. Christison, though he relates some fatal cases produced by snuff, coincides in this

* Edinburgh Medical and Surgical Journal, vol. xii. p. 11.

† Discourses on Tea, Sugar, Punch, Tobacco, &c. p. 251.

‡ Ephemerides Academicæ Naturæ Curiosæ, Dec. ii. Ann. iii. p. 321.

§ On the Nature and Treatment of Stomach and Urinary Diseases, p. 25.

|| Elementa of Materia Medica, &c. vol. ii. p. 318.

opinion.* Dr. James Johnson, in replying to an article published in the London Medical and Physical Journal, says, "If smoking were so prejudicial as its opponents assert, the world ere this would have been generally aware of it. The increased civilization and knowledge of the century have nearly banished excesses in wine and spirits from among the educated classes. * * * * * But tobacco-smoking is certainly on the increase, and we repeat that the common sense of mankind would speedily determine its injuriousness, if it really was injurious in a very perceptible degree. * * * * * We feel well assured it is not so pernicious as those who dislike it would seem to imagine."† It has been charged upon both smoking and chewing that they were causes of intoxication from the use of alcoholic stimulants. Dr. S. B. Woodward, and in this opinion he is far from being alone, says, "Indeed I have supposed it was the most ready and common stepping-stone to that use of spirituous liquor which leads to intemperance."‡ Dr. J. Cheyne says, "Tobacco is an enemy to domestic economy and personal cleanliness; it taints the breath permanently, injures digestion, impairs the intellect, and even shortens the life of some of its votaries. * * * * * The chief evil, however, in tobacco, taken in any way, is that it leads myriads upon myriads to the habitual use of ardent spirits and opium, and consequently to the ruin of soul, body and estate."§ Dr. Knowlton expressly denies this. "The use of tobacco," he says (op. cit.), "which stimulates, supersedes the call for other stimulants, in a great degree; and I must think that it tends to prevent the use of alcoholic stimulants rather than otherwise. I suppose, however, that almost all old toppers use tobacco in some form or other, because they find that in some degree it supplies the place of their intoxicating stimulus, which they cannot at all times command." A physician of Topsfield, replying directly to Dr. Woodward, says of tobacco, "A word with respect to its leading to drinking. I am inclined to the opinion that drinking leads to smoking, rather than the reverse. The cigar is used to while away the time till another glass is wanted. They are so far connected and associated. But the use of tobacco calls moisture into the mouth, and would therefore seem to preclude the necessity of frequent drinking. Chewers and smokers spit a great deal."||

Dr. J. V. C. Smith says,¶ "the cigar gives rise to all the difficulties that are imputed to the vice of smoking," and he illustrates by declaring that "the inhabitants of whole nations, as Holland, Germany, Russia, and Turkey, are addicted to the custom of smoking from youth to old age, without apparently suffering from the evils that are asserted to have their origin in this pernicious habit," because, as he infers, "the pipe is almost exclusively used." He argues that "much, if not all, the danger to health" arises from the inhalation of the hot smoke into the lungs, and that the shorter the cigar the more this injury is increased. Cigar

* Treatise on Poisons, p. 774.

† London Medico-Chirurgical Review for April, 1835, vol. xviii. p. 496.

‡ Boston Medical and Surgical Journal, vol. xx. p. 173.

§ Cyclopædia of Practical Medicine, vol. ii. p. 90.

|| Boston Medical and Surgical Journal, vol. xx. p. 248.

¶ Ibid. vol. xxix. p. 162.

smoking he also considers injurious to the teeth, giving to them a bluish tinge, producing a disease of the lining membrane of the sockets, and destroying the enamel by means of the essential oil, volatilized though it may be. An old physician, writing for Dr. Smith's paper some years before, makes similar assertions respecting cigars and pipes. From the "abuse" of the first he thinks he has seen injury, but declares he "hardly knows the instance from the pipe."* Dr. Justus Liebig, the celebrated German chemist, whose authority Dr. Smith pronounces of "the highest order,"† says that "smoking cigars is prejudicial to health, as much gaseous carbon is injuriously inhaled, that robs the system of its oxygen."‡ It certainly appears reasonable that such inhalation from cigars or short pipes should be prejudicial, and the oriental method of smoking in very long pipes, and even making the smoke pass through water and thoroughly cool itself, must be far the most preferable in every point of view, whether we regard health or pleasure. It is surprising that the eastern custom is not more generally adopted in Europe and America. In Paris, during the present mania for smoking, the hookah is coming into use, and Barthélemy, in his late poem, thus sets forth its delights.

"Heureux le grand seigneur de l'Inde et de la Perse!
Tandis qu'à ses côtés, un esclave lui verse
L'extase des élus dans les flots du moka,
Un autre est à ses pieds, penché sur son houka.
Merveilleux appareil, où la tiède fumée
Refroïdit en passant sur une eau parfumée,
Dans un long serpent qu'elle suit lentement,
Dépose l'écumé d'un impur sédiment;
Ainsi, pour ses plaisirs, le maître le réclame:
Car il traite la pipe à l'égal de la femme,
Et veut que l'une et l'autre, exempte de levain,
Arrive à ses baisirs en passant par le bain."[§]

Which verses I would present in the subsequent English dress, adhering closely to their spirit, without pretending, however, to confine myself to a strictly literal translation of every expression:

The Seignior of the East is truly blest,
By slaves attended as he lies at rest;
Some at his side rich floods of Mocha pour,
Till with their extasy his soul runs o'er;
Others obedient, waiting at his feet,
The hookah bring to make his joy complete.
Wond'rous invention, first by wealth bespoken,
To cool for luxury the heated smoke,
To make it slow through scented waters pass,
And cool itself in twisting tubes of glass—
Quit what's impure, and all that's acrid leave,
So that the lord shall only bliss receive.
He makes his hookah equal to his wife,
Both his mere adjuncts of voluptuous life;
Pure from the bath, perfum'd, and full of grace,
Both meet his kisses and his warm embrace.

But the voice of medical men is not unanimous in favor of the pipe; some there are who think it more injurious than the cigar. Dr. Bous-

* Boston Medical and Surgical Journal, vol. xx. p. 267.

† Ibid. vol. xxix. p. 162.

‡ Ibid. vol. xxix. p. 162.

§ L'Art de Fumer, ou la Pipe et le Cigare, canto i. p. 13.

siron, of Paris, in a recent monograph on the Action of Tobacco on the Health, asserts that the cigar offers the most simple, commodious and proper method of smoking; that it neither injures the lips or teeth so much as the pipe; that it is less stinking, has fewer *fuliginosités*, does not so much set the teeth on edge, and causes less spitting.* The same author observes that smokers in the humid regions of the north, die of anasarca and dropsical complaints, while in France, according to him, their maladies are desiccation, consumption, scirrhus hardening and cancer of the stomach.†

The fascinations of the pipe and cigar are so great that Robert Macnish, who has written so finely upon the various kinds of intoxication and deplored their existence, is constrained to say respecting smoking, that its attractions are "quite enough to render the habit too common to leave any hope of its suppression, either by the weapons of ridicule, or the more summary plan of Sultan Amurath."‡

Snuff-taking is attended with similar effects upon the system as chewing and smoking, together with an augmented secretion of nasal mucus. In new beginners the irritation it excites in the Schneiderian membrane causes sneezing, but when the habit is confirmed this effect entirely ceases. The sense of smell is diminished by snuff, and the tone of the voice materially altered. It impedes the respiration and is prejudicial to the complexion, which makes it the more surprising that women who are willing to make almost any sacrifice or exertion for the sake of beauty, should persist, as many of them do, in a habit which deprives them of that without which they cannot be beautiful. It is said likewise to increase the volume of the nose, and to render it conspicuously rubicund. Nasal catarrh, coryza, ozæna, lachrymal fistula, polypi in the nasal fossæ, cancer of the nose, and a host of other inflammatory and ulcerous maladies, are charged to the use of snuff.§ It is asserted that it especially gives rise to nervous tremors or shaking of the hands, and the writer who makes this statement tells us, that when Dr. Franklin was at Paris with Sir John Pringle, he begged this gentleman to observe that the complaint was very common to those persons who partook of snuff most freely. Sir John, who was himself an inveterate snuff-taker and afflicted likewise with the complaint, abandoned the habit, and not only caused the disappearance of the tremors, but recovered the "perfect exercise" of his memory which was before defective!|| Dr. Lanzoni gives a case of apoplexy which he supposes arose from the excessive use of tobacco in the form of snuff, or, as he expresses it, "*ex nimio usu subtilissimi pulveris, vulgo dicti tabaco spag-nuolo.*" He first fell into a state of somnolency, which finally passed into lethargy, causing his death on the twelfth day.¶ Pereira, however, says of this and other cases, "reasonable doubt may be entertained whether these accidents really arose from snuff."** Cullen says, "Among

* De l'Action du Tabac sur la Santé, &c. p. 69.

† Ibid. p. 65.

‡ The Anatomy of Drunkenness, p. 75.

§ De l'Action du Tabac sur la Santé, &c. pp. 44, 46, 47, 48, 50.

|| The Journal of Health, vol. i. p. 38.

¶ Acta Physico-Medica Academicæ Naturæ Curiosum, &c. vol. ii. p. 179.

** Elements of Materia Medica, &c. vol. ii. p. 317.

other effects of excess in snuffing, I have found all the symptoms of dyspepsia produced by it, and particularly pains of the stomach, occurring every day."^{*} If some of the snuff is carried from the fauces down into the stomach, this author says (*ubi sup.*) it then "more certainly produces the dyspeptic symptoms mentioned." Dr. Prout observes, in a similar vein, that the "severe and peculiar dyspeptic symptoms sometimes produced by inveterate snuff-taking are well known; and I have more than once seen such cases terminate fatally with malignant diseases of the stomach and liver."[†] On the other hand, a writer of great and deserved celebrity upon therapeutics, Dr. Pereira, says, "The habitual use of snuff blunts the sense of smell, and alters the tone of the voice; but I am unacquainted with *any other* well ascertained effects."[‡] The physician of Topsfield, whom I have before cited, says, "That snuff affects the voice, will not be denied; but it is a question whether the *power* of the voice is affected, even by snuff. The voice takes an unpleasant sound, owing to the nasal passages, as I view it, being thickened and closed by the continued stimulus of snuff."[§] Dr. William Salmon attributes apoplexy to its use, and observes, "I am confident more people have died of apoplexies, since the use of snuff, in one year, than have died of that disease in a hundred years before; and most, if not all, whom I have observed to die, of late, of that disease, were extreme and constant snuff-takers."^{||} This assertion, however, bears the marks of exaggeration so distinctly on its face, as to render a formal contradiction, in that respect, unnecessary.

A more pernicious habit of using snuff prevails than that of taking it by the nose—I mean chewing it, and this is mostly prevalent among females of the *haut ton*. Dr. Caleb Ticknor says the custom exists in New York among ladies of the "highest respectability," and that they use an ivory spoon to feed themselves.[¶] If chewing tobacco is injurious, there can be no doubt that chewing snuff is much more prejudicial, because the powder can be far more easily mixed with the saliva, and being more extensively applied to the surfaces of the tongue and mouth, affects the nervous system more and is easier absorbed. A Philadelphia physician says, "We have seen wretched creatures victims to this habit, who, in their haggard countenances and blood-shot eyes, are little better, on the scale of suffering, than the opium-eater described by Dr. Madden."^{**} It seems to me reasonable, that of all methods of using tobacco, snuff-chewing should be the worst, and the habit obtains, so far as I know, no apologists. Snuff-taking, indeed, in the usual manner, appears to find less favor among writers and physicians than chewing and smoking; but after a review of their opinions, and an examination of the results attending my own experience and observation, I am not able to satisfy myself that it is more pernicious than the other popular modes of

* A Treatise of the Materia Medica, vol. ii. p. 189.

† On the Nature and Treatment of Stomach and Urinary Diseases, p. 25.

‡ Elements of Materia Medica, &c. vol. ii. p. 317.

§ Boston Medical and Surgical Journal, vol. xx. p. 348.

|| Sephorum; or Complete English Physician, or the Druggist's Shop Opened, p. 1141.

¶ Philosophy of Living, chap. iv. p. 112.

** Journal of Health, vol. i. p. 299.

consuming the weed. As regards their ability of being indulged without injury and their effects on the constitution, I think the three methods may fairly be placed very nearly on a level; or if any scale of comparison should be constructed, chewing might be considered as capable of doing the most harm and smoking the least.

Lord Stanhope makes the custom of snuff-taking the subject of a calculation rather too strained and precise to give rise to other reflections than those of ridicule. He computes that in forty years a snuff-taker consumes two years in tickling, and two more in blowing his nose!* Macnish thinks Napoleon, who was a profuse snuff-taker, owed his death in a great measure to this substance.† It occasioned the death of the poet Jean de Santueil in a singular manner. The Duc de Bourbon, at a supper where Santueil was, caused him to drink a glass of wine into which he had clandestinely put a quantity of Spanish snuff. A complaint of the stomach and bowels was the consequence, which proved fatal in fourteen hours.‡

STEPHEN J. W. TABOR.

Shelburne Falls, Ms., Dec. 24th, 1845.

REMARKS ON DISEASES OF THE WEST.—NO. I.

[Communicated for the Boston Medical and Surgical Journal.]

It is now some seven years since, after having received the honors of my *ALMA MATER*, at the literary emporium of America, and seeing the profession was well crowded in that section of country, I, like many other youthful aspirants, sought the Far West as a place to commence my career in the healing art. And after a close and unremitted application to the duties of the profession for so long a time, I now attempt to delineate something of the diseases and medical practice in a new country.

Hundreds of our young and enterprising medical men are annually emigrating to the West, to commence practice in a new climate, and among new and strange diseases—diseases of the character of which they have no just conception, and consequently can form no proper and efficient plan of treatment. It is no unusual thing for such young men to come to this country, and commence practice under the most flattering auspices, having, they think, all the necessary education, for they have duly spent the required number of years in studying the rudiments of pathology, and all the conflicting theories of the schools, and have seen considerable of clinical practice at the East. But how soon is their most sanguine hopes and anticipations blasted; although they are here never at a loss for patients or practice, for go where they may, hardly a summer or autumn passes by, but what affords sufficient sickness to keep every one employed that gives himself the name of physician. And here lies the fault of young physicians, as well as some old ones, on coming into a new country; they do not discriminate between the diseases here and

* *Miscellanies, or Prose and Verse, by Stanhope and Harcourt, p. 415.*

† *Anatomy of Drunkenness, p. 73.*

‡ *Biographie Universelle, Ancienne et Moderne, &c. tom. xl. p. 370.*

what they have been accustomed to; and so treating, at first, our diseases according to the letter of the books, they experience the sad mortification of losing a large number of their patients, and thereby obtain a bad reputation, and are compelled to move and re-locate, or else abandon their favorite object of pursuit. In this manner, I have known many young physicians, well qualified as far as theory and a good preparatory education were concerned, almost discouraged, because they happened to lose a large number of patients for the first season of their practice in this new country.

I do not know, Mr. Editor, in what way I can confer greater benefit on the profession, and through them, in all probability, on a large number of our fellow beings, than by devoting a few numbers in your Journal to the character and treatment of the diseases of the West. Having had an extensive practice for six years in a large scope of country, on the borders of Spoon River in Illinois, and one season (the present) in a section of country nearly approaching the head of Lake Michigan, comprising the counties of Lake and Porter, in Indiana, and La Salle, in Illinois, where the number of patients for the season whom I have visited and prescribed for, has exceeded four hundred, without wishing to assume anything more than what has been the result of such an experience combined with a close observation, it may readily be supposed I shall be able to communicate some facts and incidents, which will be interesting to the student and medical man in the East.

The diseases of the West, for the most part, come and recede according to the variations of the seasons, and the changes of the elements; and to a close and scrutinizing observer, can be easily accounted for, and their approach pretty accurately foretold. Our rivers are almost annually overflowed, either by the great thaw and breaking up of winter, or the vernal rains, or frequently both combined, which cause a dense body of alluvial matter to be added to the already abundant mass of virgin soil. As the waters recede, exposure to the penetrating power of the summer's sun causes an exhalation of *miasm* which fills the air with a stench, on the borders of the streams, at least, hardly supportable. With the exception of a few cases of vernal intermittents, which I consider are more generally the latent seeds of disease of the previous year, which have lain dormant in the system, and which are now developed, perhaps by exposure to humidity, or the sudden changes to which our climate is subject, we have generally a time of uninterrupted health until July or August, when the sun has poured its sultry heat and exhausting influence upon the earth for several months. As far as my observation extends, the mere exposure to wet, even the frequent wading in water, does not seem to cause any unusual degree of sickness, when the weather is not sultry and the heat of the sun not intense. When the sickly season commences, it is sudden and rapid, and, as a general thing, confined to the settlers on the river borders. Here, then, is conclusive evidence of malaria contaminating the whole atmosphere.

What, then, is the physician to treat, when called to the bed-side of a sick patient? He has to treat a case of poison. For, be it understood,

the diseases universally, at the commencement of the sickly season, are fevers of a bilious grade, complicated in all cases, more or less, with congestion and general derangement of the abdominal viscera and secretions. As much as it may be the case, that the diseases of the pure climate of New England are generated in the body, here it seems, generally, diametrically the reverse. Nearly every case of fever is preceded by a chill, of longer or shorter duration, according to the amount of poison inhaled, the contaminated state of the sanguiferous system, and the functional or organic derangement which has already taken place. Reaction may consequently be violent or mild, may assume a continued form and become inflammatory, or prove periodical, forming what is termed the remitting fever. Continued or inflammatory fevers will be general some seasons, and at others, though fevers are as much prevalent, they will be almost universally periodical, or remittent. Here, again, is another evidence of the subtle nature of the poison of those diseases which are with the utmost propriety termed miasmatic. In the remitting form, if the physician see the patient during the chill or the cold paroxysm, he will find him, perhaps, with a pulse hardly perceptible, weak and thready, and apparently indicating great debility; his countenance is livid, features ghastly, extremities and often the whole surface of the body cold; a sighing disposition for breath, and great difficulty of breathing. He complains, if sensible, of feelings of oppression at the epigastric region and a sensation of heaviness. There are often retching, vomiting and yawning; and great restlessness and uneasiness are manifested, so that the patient can hardly lie quiet in bed. In the more aggravated cases, however, the patient may lie in a stupid manner, showing great oppression of the cerebral organ. Of all the diseases which are common to the West, the symptoms above described are more calculated to mislead the young and inexperienced physician than any other, and they serve to try his judgment and determine his future success. It is in such diseases, that quick discernment, close scrutiny and good judgment are required; and let me here advise the young physician to throw aside all theories, and depend solely upon his own judgment and ability. The hideous phantom of debility has misled more young physicians than any other obvious symptom that can be conceived. In forming his diagnosis, in a case like the one just detailed, let the physician ask himself, as he stands by his patient, what is the cause of this evident state of debility? Is it direct or indirect debility? This is the important question to be solved. Let me then say, that in all such cases as the one above described, the debility is indirect. The system is oppressed; the vital organs are crowded with a load of blood as viscid and black as tar. Let me remind the young physician of another fact which many seem to forget; that is, the chill or the cold paroxysm in which the patient is found, is not the disease, it is only an evidence of disease. It is self evident, that nature always labors to resist disease. When the vital functions are deranged, and the organs of life obstructed so that they cannot perform their office, a chill comes on, which indicates that nature is overcome—it discovers the state of oppression, the degree of poison the sys-

tern is laboring under. Now if the inherent power to sustain a balance is sufficient, nature gains the ascendancy, and soon manifests it by reaction, which is the hot or febrile stage. According to my view of the case, the fever or the hot stage is only to be looked upon as another evident symptom of diseased action, which must be sought for, and the cause must be removed as speedily as possible; for if the current of disease is allowed to gain upon the system, and its periodical manifestations again and again to take place, the circulation will at length become so obstructed and so low, that reaction, with the assistance of stimulants and all that the medical art can do, cannot be produced, and the machinery is at once wound up. I have seen many patients die in this appalling manner, when neither they nor their friends had apprehended any danger before the fatal paroxysm, or even the necessity of calling the physician.

It can hardly be supposed that a sufficient quantity of miasm is inhaled at any one time to produce such disastrous consequences. Where, then, is the first diseased action, and where is the seat of such a state of disease as has been described? A number of cases of autopsical examinations, which I have witnessed, have discovered the liver, in the first place, to have received the onus of the poison; its secretions for a length of time have gradually become bad, the bile has become thick and viscid, the ducts have become obstructed, and the bile has literally become dammed up in the liver, so that in nearly every case of death from congestion, that I have witnessed, the liver has been found of twice its natural size. This is but a small part of its mechanical obstruction to the system. After it obtains a certain engorged state, the blood, in consequence of the bile not being secreted, is gradually becoming thick; it loses its specific vital properties, and after repeatedly becoming contaminated with the miasmatic poison, it is unfit longer to send forth its life-giving energies. Some unobserved cause produces a disturbance of that nice balance, which more than human skill devised, between the arteries and the veins, and a consequent sinking and chill come on. Under this view of the case, what is the general plan of treatment to be pursued?

No specific plan of treatment, as adapted to every case, can be devised. It must be modified, by the judgment of the physician, according to circumstances, and the present symptoms of the case; for what might be a severe and dangerous attack in one patient, will be borne without suffering or alarming effects by another. But in all cases, the object to be kept in view is—first, to produce re-action and sustain the patient from sinking; and then the physician should give an antidote with a deobstruent. To accomplish the first, heat must be applied both to the extremities and the whole body, when the cold stage is great, and the disposition to sinking strongly marked. Sinapisms of strong mustard must be applied over the thorax and abdomen; and some diffusible stimuli, such as æther, brandy and camphor, must be given frequently, in considerable doses, until there are evident signs of full re-action. The patient must be supported by the stimulants until the circulation becomes uniform, and the system is relieved from oppression; for should the physician cease giving stimulants too soon, fearing re-action may be too vio-

lent, the patient would again sink, and, in spite of all his efforts, could not be again raised up. Let him apprehend less danger from increased action and undue determinations subsequently, than from the cold and sinking stage. The physician in a new country should constantly keep with him strong flour of mustard, spirits of terebinthina, and powdered camphor. He must not depend on finding these articles in possession of his patient, for most settlers in a new country make but little preparation for sickness. As the next step in the plan of treatment, sulphate of quinine must be given, with large doses of submuriate of hydrargyri; for an adult six or eight grains of quinine, combined with forty, sixty or eighty grains of the submuriate. If the calomel does not prove actively cathartic, in the course of three or four hours, some laxative, such as castor oil, infusion of senna, or the neutral salts, should be given. The use of quinine should be persisted in, without any reference to the calomel, in smaller doses every two hours, for twenty-four, thirty-six, or forty-eight hours, until copious bilious stools are procured, the liver and gall-bladder disorged, and all symptoms of a periodical disposition to chill are subdued.

ANDREW STONE, M.D.

Crown Point, Lake Co., Ind., Dec. 12th, 1845.

BROCCHIERI STYPTIC.

[ALTHOUGH the public papers are freighted heavily with admiration of a reputed great discovery made by one M. Brocchieri, who is represented to have distilled a mixture of herbs, the product of which heals up a wound in the carotid artery in twenty minutes, we do not hesitate to declare our utter disbelief in the statements. Not to be in the rear of other Journalists, however, in heralding whatever purports to be important scientific intelligence, a synopsis of the reputed virtues of *L'Eau Brocchieri* is here given. If it were not described as being a sovereign remedy for so many physical liabilities and ailments, our organ of wonder might have been excited into more activity. As the history of the discovery now stands, it is wholly at variance with nature's laws and the established processes by which she conducts all vital operations. The following is represented to be a statement of M. Blanqui, of Paris. Other experiments are also detailed, with portions of a report of a committee of the Society of Medicine of Paris, in its favor, and assertions respecting its cure of rheumatism, cancer, asthma, &c. &c., but which it is unnecessary to publish till something more authentic reaches us.]

We assisted a few days since at a series of experiments of a very remarkable character, which seemed to place beyond all question the efficiency of an anti-hemorrhagic fluid, discovered by M. Brocchieri, a Neapolitan chemist. Whatever may be our habitual prejudices against all kinds of miraculous waters, we cannot refrain from stating here the decisive facts of which we have been the witness. They are facts which by their importance appear to us to be worthy of the deep attention of the medical world.

M. Brocchieri has discovered a fluid which appears destined to put an end to many of the embarrassments of surgery, and to render immense services to humanity. This fluid, of which the secret rests with the inventor, is the result of the distillation of several vegetable substances. It is perfectly clear and limpid, has an odor of tar, and a slightly acid taste. It can be drunk with impunity, the inventor having drunk a large glass in our presence.

In the experiments made before us, the operator opened the carotid artery of a sheep. The incision necessary to discover the artery produced a hemorrhage which was immediately arrested by the application of the fluid. The wound remained clean, a little sanguine, of a rose color, and the blood ceased to run from the veins which had been divided. The knife was then put into the carotid artery, and the blood spouted over the pavement. This was the critical moment. A small portion of lint, saturated with the water, was placed on the wound, and without bandage or compression remained twenty minutes. The sheep was then suffered to go at large, and immediately began to gambol about the slaughter house, where the experiment was conducted, and eat hay with avidity.

The wound was examined with attention. It had no blood upon it, was open, and the edges covered with a sort of cuticle, thin and semi-transparent. For the greater satisfaction of those present the sheep was killed, and the perforated artery carefully dissected. The cellular tissue was of a dark red in the neighborhood of the perforation, but it was firm: it had become, in a manner, fibrous, the two edges of the wound being firmly soldered, as it were, by a peculiar composition, elastic and tenacious, which had consolidated them, so that they could not be separated without destroying the artificial tissue which had united them.

It must be that the liquid employed by M. Brocchieri exercises a peculiar influence upon the blood, decomposing and recomposing it, so that it serves to heal the wound from which it issues. There is formed by the operation of this fluid upon the separated bloodvessels a solidification of the blood, which acts as a kind of solder, and heals the wound in a few minutes.

M. Brocchieri states that, under the influence of his fluid, the wound heals without inflammation or suppuration; a sort of animal vegetation, sudden and permanent, takes the place of what is called, in surgery, fleshy pimples. It is the blood which furnishes the base of this animal vegetation—of which the theory is yet to be discovered, but of which the existence is incontestable.

It is easy to conceive of the vast importance of this discovery, if physicians will carefully examine the matter, and give their experience of its application. The greater part of the amputations will cease to be mortal—the compression, the tourniquet, the ligatures, the gangrenes, will become more and more rare. In the field of battle, it will save thousands of the wounded, and will not be less useful in the hospital.

Similar experiments took place before MM. Amussat, Lisfranc and Perizet, with equally conclusive results.

ON HYPOTHESIS IN MEDICINE.

From Dr. H. J. Bigelow's Address before the Boylston Med. Society of Harvard University.

BUT such mental efforts precede the discovery of every law in science. Every discoverer forms his hypothesis, and tests it by the truth; if the facts are numerous, the inductive method, with its tabulating machinery, offers the surest and the shortest test; if, on the other hand, the facts are few in number, especially if a law of cause is being tested by laws of phenomena, which then bear to it the relation of simple facts, I doubt if philosophers commonly have recourse to Bacon's tables; but the process still embodies the soul of the inductive method. It is induction with its tablets in the memory, an analysis far more subtle than the gross elaborations of material tables, but subject to the imperfections of the memory. In proportion as the facts are numerous, or extended through a long period of time, impressions are distorted and effaced, and results become inaccurate. It is this induction of the mind which accumulates what is called medical "experience"; and it is the multiplicity of facts which makes it so inaccurate. Apart from the results derived from the experience of others, medical experience is preceded by hypothesis. Unless the observer has no aim or object in his experiments, he wishes to ascertain something; the frequency of a symptom, or the effects of a remedy. His first few experiments give him a leaning to one side or the other, inappreciable though it be, or even disowned by himself. This is his hypothesis, and he goes on to correct or verify it.

All individual experience in life is summed up in hypothesis of future probabilities. By original experience I mean that which is not communicated to us by others: the philosopher has his hypothesis of the laws of the mind; the burnt child has his equally stringent hypothesis of the action of caloric.

In a word, hypothesis in its wide sense is based upon experience; it is the sum of past knowledge aggregated, with a view to its bearing upon future knowledge. From the wildest theories of Kepler, to which he was pointed by some hand invisible to other eyes, down to the most inevitable results of accumulated facts, all is hypothesis in its bearings upon the future and the unknown. I am aware that such a view leads to the acknowledgment of an hypothesis of cause based upon experience; but if we are sure of anything, if we know that a material mass will feel the influence of gravitation, are we not infinitely more certain of the truth founded upon all we know of constant and seemingly necessary precedence in the material and the immaterial world.

Hypothesis is drawn from few facts, and applied to many. It is experience of the past pointing to the future. But as there are some men who buy their experience in life dearly; who can take no hint; whose unyielding intellects are not to be impressed by the contact of occasional or inconsiderable truth, so there are minds in science whom no flash of revelation can arouse. The ability to detect scientific truth upon slight indications, marks the genius of the observer. Dullness may detect

truth, as the uneducated peasant stumbles upon a rich vein of ore; but the true discoverer studies the dip and succession of the strata; his quick eye detects the "lead blossom" which the metallic salts have nourished; and he sinks his shaft upon the mineral.

Do not suppose a mind like Louis' ever piled up medical facts, unless to instruct his followers, without some intention, expressed or unexpressed, of investigating them in some special point of view; and even had he thus amassed ten accurate cases of typhoid fever, is it possible the common lesion should have escaped his notice? No; it became in his mind the hypothesis, which the tables of Bacon then tested and confirmed. In observation of details, hypothetical laws of phenomena, or cause, are thus forced upon our notice. It is the nature of the mind to recognize them. If they are imaginary, subsequent induction will demonstrate their fallacy. And while the perception of these simpler laws is inevitable, I would ask whether, in the discovery of more complex laws, the paucity of facts does not compel the assumption of tentative hypothesis, based upon slender evidence? Could the laws of Kepler of the theory of gravitation, or of luminous undulations, have been evolved by the machinery of any set of tables? I think not. There were not facts enough to accumulate the common element in quantity sufficient to make it obvious. Its nature was only suspected; it was taken from elsewhere; it was supplied by the mind; its powers were tested, and it was found to account for the phenomena.

The ready detection of this common element, it has been said, distinguishes the genius of the observer. It is talent of a high order. It is a power which at one effort embraces a wide range of knowledge; whose glance takes in the whole; it has a breadth of view which seizes and distributes details in all their vastness; it perceives similarities in the remotest facts; it intuitively grasps their hitherto unknown relations, and unites them in the bonds of obvious, though startling truth. It is the true wit of science, akin to one of the high characteristics of active intellect, which sees and combines dissimilar ideas in new and sudden relations.

All great observers have possessed this talent for the perception of remote analogies. Of Bacon, who probably did not appreciate its value, Macaulay has said: "He possessed this faculty, or rather this faculty possessed him, to a morbid degree. When he abandoned himself to it without reserve, as he did in the '*Sapientia Veterum*,' and at the end of the second book of the *de Augmentis*, the feats which he performed were not merely admirable, but portentous, and almost shocking. On those occasions we marvel at him, as clowns on a fair-day marvel at a juggler, and can hardly help thinking that the devil must be in him."

The mind of Newton, sensitively alive to the slightest suggestion of nature, endowed with an exquisite scientific tact, seized and followed up her merest intimations. Through long ages she had hinted to philosophers in the falling leaves of autumn; in despair she had cried to them in the tumbling rocks and roaring waterfall; but, toiling with the barren

abstractions of theory, they heeded not her voice. In the falling apple Newton read her wish, and said,

"Malo me—petit—puella
Et fugit ad salices, et se cupit ante videri;"

and he followed her and knew her mystery.

THE BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JANUARY 14, 1846.

Smallpox and Vaccination.—The following questions have been submitted to the editor by a correspondent.

"1st. Do you think it necessary that an individual should be vaccinated more than once in the course of life, provided we are *certain* that he had the *real vaccine disease* in the first instance? 2d. If so, how often; and do you think that frequent vaccination will prevent a person from having the varioloid, if exposed to the smallpox? 3d. Will a person who has had the vaccine disease, take the *varioloid from the varioloid*? 4th. Will a person who is not protected in any way, take the *smallpox from the varioloid*? 5th. At how early, and at how late, a period will it do to take virus from the arm, to be used again, and does it make any difference whether it be taken from a child or from an adult, provided they are both healthy?"

To these interrogatories we give the following answers as the result of our experience. 1st. As the question is stated, there is no reason why the operation should necessarily ever be repeated. 2d. Varioloid is exhibited only in persons imperfectly vaccinated; that is, the virus is purulent, or has undergone changes by age and atmospheric exposure, which leave a susceptibility to receive smallpox, but modified by the partial constitutional influence that even deteriorated matter exerts on the system. 3d. Yes, if he had the vaccine disease imperfectly. 4th. Yes. 5th. It may be taken as early as the sixth day, but never later than the eighth or early part of the ninth. Much of the bad virus, and therefore imperfect vaccination, is from matter taken later than the eighth, viz., the ninth, tenth, and even twelfth day—especially when performed by all sorts of persons, with pins, needles, &c. By common consent, a child is considered the best source from which to procure virus.

Healthy Skin.—Messrs. Appleton & Co., New York, have recently published "A Practical Treatise on Healthy Skin, with Rules for the Medical and Domestic Treatment of Cutaneous Diseases, by Erasmus Wilson, Surgeon, &c." It is an admirable work, which must be well received by those who are at all ambitious to understand a subject of such importance as the diseases to which the skin is incident. Under the very best auspices, every candid physician is generally ready to acknowledge his inability to manage many of them, with any degree of certainty. There are a series of steel engravings, illustrative of the anatomical struc-

ture of the different textures, and such parts as necessarily require elucidation, from their intimate association with the skin, that enhance the value of the author's researches. A beautiful and accurate magnified section of the minute architecture of a wart, a corn, the various orders of hairs which cover the body, and other things, both curious and useful to the student and the every-day practitioner, give additional importance to this volume. There are 18 chapters, embracing every conceivable form or phase of alteration in the dermoid textures, and abounding in observations which have an important practical bearing. The style is neither labored nor over-done, but natural, and therefore easy of comprehension. Copies in Boston are to be had of Jordan & Wiley.

Churchill's Midwifery.—Presuming that all well-read practitioners are conversant with the excellent writings of Dr. Fleetwood Churchill on Midwifery, a principal object of this note is to announce a second American edition, altogether superior to the first one. Messrs. Lea & Blanchard, of Philadelphia, have brought out this edition, comprising 552 pages, accompanied with notes and additions by Robert M. Huston, M.D. There are one hundred and twenty-eight illustrations from the drawings of Bagg and others, engraved by Gilbert. If anything could give additional value to a professional work by Dr. Churchill, these would do it.

Hoblyn's Chemistry.—A truly valuable little manual, with a modest title, by the author of the "Dictionary of Terms used in Medicine," has been furnished to the profession and all others who have an interest in the beautiful and extraordinary science of chemistry, by S. S. & W. Wood, New York. As a whole, it is comprehensive, and yet by no means tedious. For common schools it would be admirable for teaching the first principles of chemistry. For all orders of students, it must be also a ready and pleasing bibliographical companion.

A Golden Palate.—Reference has often been made, in this Journal, to the extraordinary dental skill of Dr. Joshua Tucker, of this city, distinguished for his ingenuity, under trying difficulties, in patching and mending imperfectly developed or broken and decayed organs of the human frame. Within a few weeks a young man from Connecticut was placed under the care of the brothers, Drs. Tucker, in Hamilton Place, with a view to having some remedy, if possible, from art. The patient was minus not only a part of the hard palate, but also the whole of the velum palati. In looking into the throat, there was seen no valve, nor even the fragment of one, to hide the posterior openings of the nasal cavities. A very defective articulation, therefore, necessarily existed. They first constructed a hard palate, of gold, which was admirably adjusted. On the posterior margin of that, was an artificial valve, of India rubber, attached to the inner edge of a spring, somewhat resembling, in form, the letter V. Instead of being in one single piece, it was constructed of strips, which allowed one to slide over the other, and resembled the feathers in a pigeon's tail, when spread out. So nicely was this part of the mechanism fitted to the ragged muscular walls on the anterior

boundary of the pharynx, that when finally introduced to its place, it was grasped by the apparently loose extremities of the muscles, and the fan-like valve moved by them, very much as the natural one is narrowed or widened in every well-formed throat. By this curious device, the description of which falls infinitely below what is due to the ingenuity of the gentleman who contrived it, a modification of the voice is produced, that must ultimately prove of invaluable service to the person for whom it was constructed. After a little practice, we can discover no reason why he may not articulate with a distinctness that shall be perfectly satisfactory to himself, and without having it at all suspected by others that a congenital malformation of an essential part of the vocal apparatus ever existed.

Worm in an Abscess.—Dr. Henry Bigelow, of Derne St., informs us that a boy, 9 years of age, has been under his care with an extensive superficial abscess on the whole front of the abdomen. When opened recently, about one inch below the umbilicus, it discharged very copiously, for about three days; but on the fourth, the flow was checked. Pain ensued, and it was re-poulticed. On taking off the first poultice, a large round worm, eight or nine inches long, made its exit, alive. Very shortly after, the patient perfectly recovered.

Chart of Poisons.—Dr. R. T. Crosby, of Manchester, N. H., has devised a tabular scheme of all the prominent poisons—chemical, vegetable, and animal. The articles are arranged in one column; and opposite each, in other columns, the symptoms produced by them are noted, the best known remedies, &c. As the popular names of poisonous articles are retained, instead of the chemical and botanical terms, the whole can be understood by all who can read. It is designed to be suspended for common observation, and is to be the guide in all emergencies by poison, till medical advice can be obtained. It is about being published, and whenever it appears, notice of it will probably be given.

Dr. Bigelow's Discourse.—A few extracts are republished, to-day, from the discourse delivered by Dr. H. J. Bigelow, before the Boylston Medical Society, as a sample of his reasoning, good taste and accurate judgment. There is much to hope for the future from such promising indications.

Needle found in the Heart of a Cow. By J. H. BEECH, M.D., of Gaines, N. Y.—About four years ago, Mr. Jas. Mather, of this village, requested me to examine the body of a cow which had just died, being in very good flesh. He had owned the cow about two years: she had been sick at short intervals during most of the time, and recently had appeared to be distressed for breath. I found in the pericardium two or three quarts of thinnish, purulent, *acid* matter. In taking out the heart, my finger was pricked with what I found to be the point of a large darning needle. I think its track could be seen from the *oesophagus*; it seemed to have entered the right ventricle just below the middle, had passed directly through, and was fixed across the left ventricle about through the middle, with the point sticking out on the left side $\frac{1}{4}$ of an inch. There was slight hypertrophy of the walls of the ventricles; otherwise the organ ap-

peared healthy. Some congestion existed in a small portion of the left lung. These were all the signs of disease which I saw; the weather was very cold, and I was unable to make as close an examination as I would have liked.

I have the needle now in my possession; it is very much rusted, but the eye is still entire.

This cow had been fed on "slops" by a former owner, but not while in Mr. M.'s possession. I think she must have got the needle in that way, and that it had been in the body more than two years, and for a long time in the substance of the heart.—*Buffalo Medical Journal*.

Medical Miscellany.—There were 26 deaths by smallpox at Philadelphia week before last.—Dr. White, the Oregon delegate, is about returning again.—A paper called the Magnetist, advocating mesmerism, and edited by Dr. John Thompson, has been started at Richmond, Virg.—The anti-hemorrhagic fluid, discovered by M. Brocchieri, a Neapolitan chemist, makes a good text for professed paragraph makers.—Dr. S. J. W. Tabor, recently of Shelburne Falls, has become the editor of the Northampton (Mass.) Democrat.—A child was recently born near Detroit, without arms. The right leg stops at the knee, and has a foot which moves freely; the left leg is perfect to the ankle, but the foot is singularly clubbed. There are but four toes on either foot.

To CORRESPONDENTS.—Dr. L. Woodruff's paper on Stimulants in Inflammation, Dr. Chapin's on Instrumental Delivery, and Dr. Chapin's on Intermittent Fever, have been received.

MARRIED.—At Salem, Mass., Dr. James Stone, Jr. to Miss E. Shreve.

DIED.—At Charleston, S. C., Dr. Lesigneux, the oldest physician in that city. He was a native of France, aged 84, and had practised in Charleston for over half a century.—At Richmond, Va., Dr. James McCan.

Number of deaths in Boston, for the week ending Jan. 20, 33.—Males 17, females 16. Stillborn, 9. Of consumption, 7—smallpox, 4—child-bed, 1—erysipelas, 1—scarlet fever, 4—infantile, 3—disease of the liver, 1—bronchitis, 1—lung fever, 3—hooping cough, 1—inflammation of the brain, 1—paralysis, 1—cancer, 2—convulsions, 1—dropsy of the brain, 1—old age, 1.
Under 5 years, 13—between 5 and 20 years, 3—between 20 and 60 years, 16—over 60 years, 2.

REGISTER OF THE WEATHER,

Kept at the State Lunatic Hospital, Worcester, Mass. Lat. 42° 15' 49". Elevation 483 ft.

Dec.	Therm.	Barometer.	Wind.	Dec.	Therm.	Barometer.	Wind.
1	from 30 to 36	from 29.90 to 29.93	N E	17	from 21 to 40	from 29.26 to 29.40	N W
2	19 24	29.00 29.30	N W	18	33 40	29.25 29.35	S W
3	9 20	29.70 29.76	N W	19	33 36	29.13 29.16	S W
4	14 27	29.25 29.60	N E	20	19 27	29.20 29.37	N E
5	26 31	29.79 29.19	N W	21	13 30	29.12 29.16	N W
6	20 24	29.39 29.58	N W	22	15 24	29.26 29.33	N W
7	12 23	29.70 29.77	N W	23	14 27	29.57 29.66	N W
8	22 32	29.43 29.55	S W	24	11 28	29.79 29.83	N W
9	26 37	29.98 29.10	N W	25	21 29	29.40 29.53	N E
10	24 30	29.02 29.23	N W	26	21 22	29.45 29.50	N E
11	11 14	29.40 29.62	N W	27	15 26	29.26 29.48	N W
12	0 14	29.78 29.86	N W	28	23 36	29.23 29.30	S W
13	1 34	29.90 29.94	N W	29	27 42	29.20 29.30	S E
14	18 30	29.48 29.73	N E	30	26 36	29.16 29.30	N W
15	26 36	29.78 29.00	N E	31	13 22	29.40 29.58	N W
16	21 31	29.68 29.89	N W				

Range of the Thermometer, from 1° below 0 to 42° above. Barometer, from 29.68 to 29.94. Rain, 5.39 inches—snow, 13 inches.

A Suit for Medical Services by a Clairvoyant.—In Justices Court, Poughkeepsie, N. Y., William Livingston vs. Henry S. Marshall. This was an action for medical attendance and services by the plaintiff and Jackson Davis, in the defendant's family, examining and prescribing for his wife and daughter. The bill claimed was \$50. The plaintiff proved his services. On the part of the defendant it was proved by the cross-examination of the plaintiff's witnesses, that Livingston and Davis doctored on the plan of medical clairvoyance. The mode was described by putting Davis to sleep, and that then he examined the patient and prescribed the remedies to be applied; that what he named was taken down by Livingston and invariably given to the patient; that all the examinations were made by Davis when in the mesmeric state, with a handkerchief over his eyes, and that Livingston made no examinations himself. The defendant then called witnesses who swore that they had examined (one of them Dr. Hughson) over 100 cases. That the person mesmerized could not tell the internal condition of a patient any better than a drunken man, or one in a half-sleeping, half-waking or dreaming state. Dr. Thomas testified that the whole system was a piece of fraud and humbuggery; and that upon ascertained principles no one can tell the nature of an internal disease by this mode, any more than to tell the fortune of a person by looking at his hand.

The witnesses further testified that this was no branch of the practice of physic and surgery. Some other evidence was given, but not very material. Mr. Thompson, counsel for the defendant, then summed up the cause, and contended,

1. That no action would lie for the wages of a misdemeanor; that the law will not enforce any such contract, expressed or implied.

2. That the pretence of prescribing for or curing disease according to the responses of a sleeping boy, is all jugglery by statute; and a misdemeanor, no judgment being exercised by the physician—1 Review, p. 745, s. 1.

3. That the consideration of the promise had failed, being a *fraudulent and false* representation of skill and ability to cure, &c.; a mere gambling device.

4. That it was not a branch of "physic and surgery," and therefore such services could not be made the ground of an action under the repealing statute of 1844, in relation to the practice of medicine.

Mr. Thompson gave the history of the various medical humbugs which have been adopted and exploded for the last 200 years, especially of the touch for king's evil; of the weapon ointment, in which case the wound of the patient was washed and the weapon carefully anointed with the ointment and laid away, which effected the cure; the tar water mania of Bishop Berkley; the universal catholicon; to which the counsel added the history of the delusion under Matthias, who had a mode of his own of whipping the sick devil out of his patients with a cowhide! The case was then, after an able speech from C. S. Corlis, counsel for the plaintiff, submitted to court, who decided in favor of the defendant, principally (it is said) on the ground of the deception and fraud of the system.—*Poughkeepsie Telegraph*.